

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
COVER SHEET FOR AMENDMENTS**

Case Name: Tianna Anthony

Case No.: 23-42629

DESCRIBE INFORMATION BEING AMENDED BY CHECKING APPLICABLE BOX(ES) BELOW:☐ **Amendment to Petition:**

- ☐ Name ☐ Debtor(s) Mailing Address ☐ Alias
☐ Signature ☐ Complying with Order Directing the Filing of Official Form(s)

☐ **Summary of Schedules**☐ **Statement of Financial Affairs**☒ **Schedules and List of Creditors:**

- ☐ Schedule A/B
☐ Schedule C ☐ Debtor 2 Schedule C
☐ List of Creditors ☐ Schedule D ☐ Schedule E/F, and
☐ Add creditor(s), provide address of creditor already on the List of Creditors, change amount or classification of debt - **\$32.00 Fee Required**, or
☐ Change address of a creditor already on the List of Creditors – **No Fee Required**
☐ Schedule G
☐ Schedule H
☒ Schedule I
☒ Schedule J
☐ Schedule J-2

NOTE: Use Page 2 for any corrections or additions to the List of Creditors**Additional Details of Amendment(s):**

Update income & expenses, business income and expenses

➡	DECLARATION OF ATTORNEY: I declare that the above information contained on this cover sheet may be relied upon by the Clerk of the Court as a complete and accurate summary of the information contained in the documents attached.	
Date	10/19/2023	Signature: /s/Noel A. Cimmino Noel A. Cimmino P61176
➡	AFFIRMATION OF DEBTOR(S): I declare under penalty of perjury that I have read this cover sheet and the attached schedules, lists, statements, etc., and that they are true and correct to the best of my knowledge, information and belief.	
Date	10/19/2023	Signature /s/Tianna Anthony Tianna Anthony
Date	10/19/2023	Signature/s/

CORRECTIONS TO THE LIST OF CREDITORS

Use this section to make corrections to the name(s) and address(es) of any creditor(s) listed on the current schedules and List of Creditors.

PREVIOUS NAME/ADDRESS OF CREDITOR: PLEASE CHANGE TO:

PREVIOUS NAME/ADDRESS OF CREDITOR: PLEASE CHANGE TO:

PREVIOUS NAME/ADDRESS OF CREDITOR: PLEASE CHANGE TO:

ADDITIONS TO THE LIST OF CREDITORS:

Use this section of the form to identify creditors added to the schedules and List of Creditors

NAME OF CREDITOR:

ADDRESS:

NAME OF CREDITOR:

ADDRESS:

NAME OF CREDITOR

ADDRESS:

FOR ADDITIONAL CORRECTIONS/ADDITIONS, COPY THIS SHEET AND CONTINUE

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION**

IN THE MATTER OF:

Tianna Anthony

**Case No. 23-42629
Judge Thomas J. Tucker
Chapter 13**

_____ /

PROOF OF SERVICE

Erin Zamanigian attests under the penalties of perjury that on **October 19, 2023**, he/she served a copy of the Coversheet for Amendments, Notice Required Under L.B.R. 1009-1(d), and Proof of Service in said case upon the following parties either electronically if a registered ECF user or by depositing said copies in the U.S. Mail, postage prepaid, properly addressed as follows:

Trustee: Tammy L. Terry - electronically served

/s/ Erin Zamanigian
Erin Zamanigian

Fill in this information to identify your case:

Debtor 1 Tianna S. AnthonyDebtor 2
(Spouse, if filing)United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGANCase number 23-42629
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

- ☒ Employed
- ☐ Not employed

Self EmployedEvent PlannerHow long employed there? 8.5 years

Debtor 2 or non-filing spouse

- ☒ Employed
- ☐ Not employed

ProductionFCA US LLC Corporate Payroll ServicesP.O. Box 61870
Phoenix, AZ 8508210 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

For Debtor 2 or
non-filing spouse2. \$ 0.00 \$ 5,506.003. +\$ 0.00 +\$ 1,695.004. \$ 0.00 \$ 7,201.00

Debtor 1 **Tianna S. Anthony**Case number (if known) **23-42629**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 0.00	\$ 7,201.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 1,872.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 216.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 22.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 80.00
5h. Other deductions. Specify: _____	5h. \$ 0.00	\$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ 2,190.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 5,011.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 1,791.00	\$ 38.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: _____	8h. \$ 0.00	\$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 1,791.00	\$ 38.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 1,791.00 + \$ 5,049.00	= \$ 6,840.00
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____	11. +\$	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$	6,840.00
		Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

**United States Bankruptcy Court
Eastern District of Michigan**

In re **Tianna S. Anthony**

Debtor(s)

Case No. **23-42629**Chapter **13**

BUSINESS INCOME AND EXPENSES

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:

1. Gross Income For 12 Months Prior to Filing: \$ 0.00

PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

2. Gross Monthly Income \$ 5,062.00

PART C - ESTIMATED FUTURE MONTHLY EXPENSES:

3. Net Employee Payroll (Other Than Debtor)	\$ <u>0.00</u>
4. Payroll Taxes	<u>0.00</u>
5. Unemployment Taxes	<u>0.00</u>
6. Worker's Compensation	<u>0.00</u>
7. Other Taxes	<u>0.00</u>
8. Inventory Purchases (Including raw materials)	<u>0.00</u>
9. Purchase of Feed/Fertilizer/Seed/Spray	<u>0.00</u>
10. Rent (Other than debtor's principal residence)	<u>2,000.00</u>
11. Utilities	<u>650.00</u>
12. Office Expenses and Supplies	<u>0.00</u>
13. Repairs and Maintenance	<u>320.00</u>
14. Vehicle Expenses	<u>0.00</u>
15. Travel and Entertainment	<u>0.00</u>
16. Equipment Rental and Leases	<u>0.00</u>
17. Legal/Accounting/Other Professional Fees	<u>0.00</u>
18. Insurance	<u>69.00</u>
19. Employee Benefits (e.g., pension, medical, etc.)	<u>0.00</u>

20. Payments to Be Made Directly By Debtor to Secured Creditors For Pre-Petition Business Debts (Specify):

DESCRIPTION	TOTAL
Website	45
Alarm	55
Internet	132

21. Other (Specify):

DESCRIPTION	TOTAL
-------------	-------

22. Total Monthly Expenses (Add items 3-21) \$ 3,271.00

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2) \$ 1,791.00

Fill in this information to identify your case:

Debtor 1 Tianna S. AnthonyDebtor 2
(Spouse, if filing)United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGANCase number 23-42629
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents names.

Son

2

☐ No☒ Yes

Daughter

3

☐ No☒ Yes☐ No☐ Yes☐ No☐ Yes3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,622.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Tianna S. Anthony**Case number (if known) **23-42629**

6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	400.00
6b. Water, sewer, garbage collection	6b. \$	100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	0.00
6d. Other. Specify: cell phone	6d. \$	200.00
cable and internet	\$	270.00
7. Food and housekeeping supplies	7. \$	870.00
8. Childcare and children's education costs	8. \$	170.00
9. Clothing, laundry, and dry cleaning	9. \$	250.00
10. Personal care products and services	10. \$	423.00
11. Medical and dental expenses	11. \$	130.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	500.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
14. Charitable contributions and religious donations	14. \$	0.00
15. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	173.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	150.00
15d. Other insurance. Specify:	15d. \$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:		
	16. \$	0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	830.00
17b. Car payments for Vehicle 2	17b. \$	452.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
18. \$		0.00
19. Other payments you make to support others who do not live with you.		
\$		0.00
Specify:		
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
21. Other: Specify:	21. +\$	0.00
22. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	6,540.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	6,540.00
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	6,840.00
23b. Copy your monthly expenses from line 22c above.	23b. -\$	6,540.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$	300.00
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain here:		